

Advisory Committee to the Court Appointed Special Advocate and Children's Justice Act Programs

AGENDA

Virtual Meeting January 24, 2025

10:00 AM - 12:00 PM

Microsoft Teams

Join the meeting now Meeting ID: 239 566 544 04 Passcode: ZR23tM6v Dial in by phone +1 434-230-0065,,66943385# United States, South Hill Phone conference ID: 669 433 85#

- 1. Welcome, Roll Call and Introduction of Guests
- 2. Review and Approval of October 25, 2024, Minutes
- 3. Conflict of Interest Act Training and Statement of Economic Interest Filing Requirements
- 4. Legislative Update: Bill Tracking
- Presentation of Licensed Childcare Updates Jeff Williams, Assistant Superintendent, Childcare Safety & Equity, VDOE
- **6. Presentation of Human Trafficking MDT Mandate** McKayla Burnett, DCJS Human Trafficking Coordinator

7. CJA Program Update

- Multidisciplinary Team Support
 - MDT 101 Updates / Good to Great Trainings for 2025
 - o State MDT Roster
- Child Death Investigation Protocol
- 2025 CJA Annual Meeting
- 8. CASA Program Update

9. Citizen Review Panel

- Review of VDSS Response to Recommendations from 2024
- Consideration of Updated Recommendations for 2025

10. Adjournment

CASA/CJA Advisory Committee Citizen Review Panel 2024 Recommendations

Prevention/FFPSA

The Virginia Department of Social Services (VDSS) should continue to focus timely prevention efforts that ensure safety and well-being of the child and support families in ways that provide support and enhance timely permanency. This includes providing services to prevent removal, and services to support adoptive and kinship families. VDSS should continue to build capacity for evidence-based practices and services and then work toward enhancing a robust and qualified workforce. Services should include respite for all members of the family including siblings in the home. Primary and secondary prevention efforts should focus on avoiding penetration into and continued need for tertiary services. Development and integration of best practices of the Science of Hope in working with children and families. Include education stability as a prevention strategy.

The VDSS should develop mechanisms for reporting on its prevention services model. This would include establishing criteria and definitions of the various levels of prevention interventions. Consideration should include reports on the number of prevention (precourt intervention) cases served, length of time cases are served in prevention, outcomes of prevention efforts, interventions and services provided, how many prevention cases were non-compliant, and what steps the Department took when cases were non-compliant.

System Improvement

The Virginia Department of Social Services (VDSS) continues to focus on family engagement practices as a cornerstone of the child welfare system. To implement family engagement practices effectively, more trained workers are needed. Efforts should be expended to explore interagency collaboration regarding delivery of case management services and implementation of lived experience navigator services to guide parents. VDSS has experienced the impacts of a reduced workforce due to the pandemic, fiscal constraints, and vicarious trauma. Important to retain workers to maintain uniformity and strengthen the workforce.

VDSS should encourage local Departments of Social Services (LDSS) to improve communication and collaboration across jurisdictions when investigating child abuse and neglect and participate in a local multidisciplinary team (MDT), if available. Per Virginia Code § 15.2-1627.5, LDSS-Child Protective Services Unit representation is a required member on a local MDT.

VDSS should encourage LDS agencies to improve cross systems collaboration to support thorough investigations of child abuse and neglect. This should include cross

systems joint training opportunities. Upon commencement of dependency proceedings, VDSS should encourage inclusion of attorneys, relatives and other actors in service planning (i.e., family partnership meetings and team meetings).

The pandemic presented numerous challenges, especially for frontline workers. The VDSS should continue to examine the preparedness for the COVID19 pandemic and begin planning for the next pandemic that will inevitably strike. Included in this planning should be helping teachers and other mandated reporters to identify child abuse and neglect in a virtual environment. VDSS should continue to study trends in the reductions of the number of child abuse and neglect complaints and determine if the reduction in complaints trends actually equates to a reduction in harm to children.

VDSS in-home services practices align CPS ongoing practice, prevention services, and the implementation of the Family First Prevention Services Act. The Advisory Committee requests continued collection of data and information on the path to permanency for children and families involved in Alternate Living Arrangements.

As the Virginia Department of Social Services builds the new Child Welfare Information System (CWIS), the Committee requests updates and asks the Department to seek stakeholder input into the development of data points for the system.

The Virginia Department of Social Services will provide the Committee with a report on the impact and utilization of the Virginia Heals project.

Diversity, Equity and Inclusion in Child Welfare

The Virginia Department of Social Services (VDSS) should ensure equity in its response to child welfare including examination of data through an equity lens. The examination of child welfare practice should include practice implications for children and caregivers of color, children and caregivers that identify as LGBTQ, and children and caregivers with disabilities.

VDSS should ensure voices with lived experience are included in decision-making and policy considerations, with special consideration given to parents and caregivers.

The Committee would like an update on the impact of halting the Qualified Residential Treatment Placement (QRTP) designation for residential setting. The committee would like an update on the number of children in hospitals, hotels and offices (safe and sound task force efforts).



COMMONWEALTH of VIRGINIA

DEPARTMENT OF SOCIAL SERVICES

October 10, 2024

Sent Electronically Melissa O'Neill CASA/CJA Citizen Review Panel Coordinator Virginia Department of Criminal Justice Services 1100 Bank Street, Richmond, VA 23219

Dear Ms. O'Neill:

The Virginia Department of Social Services (VDSS) commends the Court Appointed Special Advocate Program and Children's Justice Act Committee for their work as an active Citizen Review Panel (CRP) as part of Virginia's Child Abuse Prevention and Treatment Act (CAPTA) Plan. The feedback for our Child Protective Service Program by our Citizen Review Panels is crucial to the improvement of our program for the citizens of the Commonwealth.

Child Protective Services (CPS) in Virginia is a continuum of specialized services designed to assist families who are unable to safely care for their children. CPS is child-centered, family-focused, and based on the belief that the primary responsibility for the care of children rests within their families. CPS encompasses the identification, assessment, investigation, and treatment of abused or neglected children. Virginia's specialized services are designed to:

- Protect children and their siblings;
- Prevent future abuse or neglect;
- Enhance parental capacity to provide adequate care; and
- Provide substitute care when the family of origin cannot remedy the safety concerns.

CPS will respond to valid child abuse or neglect reports by conducting a Family Assessment response or an Investigation response, also known as Differential response. The goals of both responses are: to assess child safety, strengthen and support families, and to prevent future child maltreatment. The track decisions are guided by state statute and local policy. In SFY 2023, there were 52,480 children reported as possible victims of child abuse or neglect in 33,679 completed reports of suspected child abuse or neglect. Of those children, 4,368 were involved in founded Investigations, 8,033 were involved in unfounded Investigations, and 40,079 in Family Assessments (differential response). In SFY 2023, Family Assessments accounted for 76% of all CPS reports accepted by local Departments of Social Services and 38 children died because of abuse or neglect. There were 26 children involved in 26 Human Trafficking Assessments, which are required when a report alleges a child is a victim of human trafficking, sex, or labor, and does not meet the validity criteria for an Investigation or Family Assessment.

Over the last year, VDSS continues to prioritize working towards meeting our federal outcomes related to child protection including responding to reports of abuse with a timely consistent response, providing ongoing services to for children who are at high or very high risk (In-Home services) and ensuring timely case closure. Additionally, VDSS is prioritizing family engagement through the use of Family Partnership Meetings, and Child and Family Team Meetings.

We have reviewed your recommendations for our CPS program and thank you for your input. VDSS offers the following responses to your recommendations:

1. Prevention/FFPSA

In 2024, the General Assembly, through <u>House Bill 27</u> and <u>Senate Bill 39</u>, established the Parental Child Safety Placement Program, a statutory framework for a parent, guardian, or legal custodian to arrange for a Parental Child Safety Placement for their child with relatives and fictive kin when a LDSS has determined that the child cannot remain safely in their home of origin. Regardless of where the child may temporarily or permanently reside, the framework ensures protections for parental rights, promotes placement with relatives or fictive kin, supports reunification efforts, and provides specific timeframes for permanency. Solidifying and enhancing tertiary prevention practice will let VDSS continue to partner and focus on earlier (primary and secondary) prevention activities, ensuring a well-resourced prevention continuum. In-Home Services also ensures that when children temporarily or permanently reside with relatives or fictive-kin caregivers, services are provided to ensure the safety and permanency of those living arrangements.

Implementation of the Parental Child Safety Placement Program framework will establish collaboration across programs and focus on building relationships among the triad between caregivers, children, and LDSS. This framework represents a significant practice shift for all 120 LDSS and the full child welfare continuum: Prevention/In-Home, Child Protective Services, Foster Care, and Resource Family. VDSS is managing the process to implement necessary revisions to written practice guidance, regulatory actions, LDSS training and change management, and updates to the child welfare information system.

One of the key tenets of the establishment of the Parental Child Safety Placement Program is the Parental Child Safety Placement Agreement. The Parental Child Safety Placement Agreement codifies the guardrails needed to protect children and families by promoting family-driven decisions, ensuring the preservation of parental rights, establishing consistent practice among the LDSS, and enhancing the provision of In-Home Services to children and families.

VDSS will continue to focus on the use of data to drive decisions, support recommendations, and conduct thorough root-cause analysis in this practice area. Detailed data about Parental Child Safety Placements and services will offer insight into the circumstances leading to the use of these placements and the types of services and supports provided during the placement. This data will also assist VDSS to further explore whether disproportionalities and disparities exist in Parental Child Safety Placements statewide and how the practice affects the well-being and permanency of children and families over time. VDSS remains committed to prioritizing family-based support and decision-making to keep children with their parents in their own communities. Families are the experts of their lives, and practice will prioritize engaging families in a deliberate manner to develop and implement creative, individual solutions that build on their strengths to meet their identified needs.

2. System Improvement

VDSS remains a key partner in the Multidisciplinary Team (MDT) Stakeholder Group which is a collaborative partnership between Virginia Department of Criminal Justice Services, Children's Advocacy Centers of Virginia, Virginia Department of Social Services, and Commonwealth Attorney Services Council, and is committed to strengthening and sustaining MDTs throughout the state. The MDT Stakeholder Group believes that training, resources, and support targeted at MDTs at key points along their developmental pathway have the greatest potential to cultivate effective teams who are best equipped to help children and families impacted by abuse. The MDT Stakeholder Group developed two training courses to support MDTs across the Commonwealth.

The first training course, MDT 101 - Building a Strong Foundation for MDT Success, is designed to provide a comprehensive introduction to the Multidisciplinary Team model to leaders from new and developing MDTs. Participants will learn about the benefits of collaborative community response to child abuse allegations. The second training course, Good To Great - Enhancing MDT Effectiveness and Functioning, is intended to support MDTs who have been operating in their current composition for 3-5 years. It is often at this point that we begin to see MDTs experience growing pains and encountering challenges around collaboration, engagement, and commitment to the model. This training seeks to empower teams to take responsibility for their own effective functioning and offers tools and approaches that support healthy collaboration. This training is designed to be attended by groups of team members from the same MDT.

So far in CY2024, the MDT Stakeholder Group, held two virtual MDT 101 training sessions that reached 117 individuals. There are two additional MDT 101 training

sessions scheduled for October 24th and December 10^{th.} Additionally, at the DCJS Domestic Violence Conference scheduled to be held in October, there will be two sessions specifically on MDTs.

For CY2025, the MDT Stakeholder Group anticipates offering at least two in-person sessions that will likely include the Good To Great - Enhancing MDT Effectiveness and Functioning training content.

VDSS Division of Family Services (DFS) has selected a vendor to provide Human-Centered Design (HCD) services to inform the development of a federally compliant Comprehensive Child Welfare Information System (CCWIS). The VDSS provides semiannual status updates to the General Assembly and weekly updates to the project team.

To prepare the workforce for a modern child welfare information system, this project, VDSS DFS HCD Consultant, will review and update established workflows, prepare journey maps for system users and for stakeholders in the community that they encounter, identify pain points in current processes, and provide a roadmap to improve current processes. The deliverables will facilitate the building of a state-of-the-art child welfare information system that is built with the end user in mind. This project will follow human centered design principles including, but not limited to, understanding the end users and stakeholders, engaging with end users and stakeholders throughout the process, and testing/revising processes based on end user feedback.

The Office of Trauma and Resilience Policy (OTRP) has been actively engaging with local partners and communities to promote resilience and healing among the children, families, and individuals being served. The OTRP strives to provide essential resources, training, and technical assistance to local agencies and organizations, with a focus on the Virginia HEALS Trauma-Informed Model of Service Delivery <u>Virginia HEALS</u> – <u>Virginia HEALS</u>. In support of these activities, the OTRP explores and implements various training and funding opportunities, fostering the adoption of trauma-informed and healing-centered policies, practices, and programs across the state.

The Virginia HEALS Trauma-Informed Model of Service Delivery, and the resources provided in the toolkit that supports it, continue to have a significant impact across systems. The OTRP provides on-going training and technical assistance related to Virginia HEALS to local service providers, with this past year seeing a particular focus on the Trauma-Informed Agency Self-Assessment (TIASA) and the Screening for Experiences and Strengths (SEAS). In SFY2024, the OTRP facilitated training sessions for 723 service providers across systems (child welfare, behavioral health, advocacy, etc.) on various components of the Virginia HEALS toolkit, and at least 132 child and family-serving providers participated in e-Learning modules.

The OTRP also contracted with and provided support and technical assistance to agencies within five of Virginia's multi-disciplinary Trauma-Informed Community networks to participate on a learning collaborative, Creating Healing-Centered Organizations. Using data from the Virginia HEALS Trauma-Informed Agency Self-Assessment, these

agencies engaged in a strategic planning and implementation process to become more healing-centered both internally, with their workforce, and externally, with the children, families, and individuals that they serve.

3. Diversity, Equity, and Inclusion in Child Welfare

VDSS and the DFS are committed to diversity, equity and opportunity in child welfare. While the DEI committee has disbanded temporarily, DFS is working on adding inclusive language in guidance across the continuum of programs using an equity lens. In addition, DFS has a Parent Advisory Council that includes parents who have experience with the child welfare system. DFS also manages the SPEAKOUT committee. This committee is comprised of current and former foster care and adopted youth. Both groups provide feedback and suggestions on policy and programs through their lens of lived experience. Both committees are managed by the Permanency team.

VDSS made the decision to "pause" the designation of Qualified Residential Treatment Programs (QRTP) beginning April 1, 2023. This decision was made for several reasons including:

• Virginia shifted to Medicaid as the first payer for all children's Medicaid approved residential facilities beginning July 1, 2021 (the same date as the implementation of Family First and the QRTP designation). While VDSS incorporated this shift to Medicaid in planning for QRTP implementation, the actual impact of this shift was far greater than anticipated, resulting in significantly reduced IV-E claiming for children's congregate care placements.

 \cdot VDSS was aware that the process for accessing IV-E funds for QRTP placement was complicated and created a significant burden on LDSS staff.

• VDSS continued to see a significant number of case errors with QRTP placements, impacting IV-E funding as well as CSA funding, resulting in a significant cost to localities. These case errors appeared to stem at least partially from Virginia's outdated child welfare information system (OASIS.) In addition, because Virginia's complex congregate care system poses a barrier to requiring all residential facilities to become QRTPs, it proved challenging for workers to navigate when QRTP rules apply and when they don't.

• LDSS expressed concerns that the QRTP providers were not actually doing anything above and beyond what they had been doing prior to the designation so that youth in these placements were not receiving better quality care. The designation of QRTPs was largely based on the providers self-report which proved to be problematic.

Since the pause, the percentage of youth in congregate care has increased. In April 2023 11.2% of youth in foster care were placed in congregate care while in July 2024 13.3% of youth were placed in congregate care. The overall number of youth in foster care has also increased and there has been an increase in older youth entering care which likely

explains the increase in congregate care placements, not the pause of QRTP designation. It should also be noted that the percentage of children in kinship placements has increased over this same time period going from 11.6% to 15.3%. Although there has been in increase in placements in congregate care, there has been a greater increase in the more desirable placement of youth with relatives.

VDSS is committed to ensuring that children and youth who need a level of treatment that can only be provided in a congregate care setting receive quality care which is trauma informed and continues to explore bringing back the QRTP designation when it can be done successfully. Virginia will be undergoing a federal title IV-E review in 2025 and it would not be in the state's best interest to reinstate a process that would have such an impact on the review without sufficient time to perfect the process. Additionally, VDSS has noted the challenges with the current child welfare information system that does not allow any of the process to be automated. As VDSS works to replace the current system, many of these processes that can be automated will be built into the new system. The new system is estimated to be in place in 2026.

There has been an average of 20-22 youth on the VDSS Home Office High Acuity Team's active monitoring list for the last 90 days. This list includes youth who are currently without a placement and in the LDSS office/hotel as well as youth who are at risk of being without a placement within the next 30 days or so. Over the last 90 days there has been an average of one youth sleeping in the LDSS office/hotel. One notable trend this summer is that there have been many referrals for 17-year -old youth that are within six months of their 18th birthday. This is challenging for the LDSSs and the High Acuity Team as they still have a high level of need and very few congregate care providers are willing to consider youth at this age since they cannot remain in that placement once they turn 18. However, it continues to be evident that the NEW referrals (kids with no prior Safe and Sound/High Acuity Team involvement) are displaced for fewer days. Through June and July 2024 there was a significant decrease in TOTAL days of youth displacement statewide (in comparison with the previous quarter). Unfortunately, these trends do not necessarily mean that youth are displaced less often than they previously have been, as the High Acuity Team has been working diligently to streamline the process and approach to assisting LDSSs with displaced youth. In November 2023, VDSS hired a liaison who works at The Commonwealth Center for Children and Adolescents and assists local departments when youth in their custody are psychiatrically admitted to the hospital. This position provides support to the LDSS in discharge planning, identifying placements, and making referrals. A third High Acuity Placement Coordinator joined the team in July, also expanding capacity to support LDSS with high acuity youth. The expanded capacity has provided additional support to the LDSS but has not eliminated the issue of children and youth not having placements.

Sincerely,

Shannon Hartung Shannon Hartung

Shannon Hartung ⁰ Protection Program Manager

5600 Cox Road · Glen Allen VA · 23060 www.dss.virginia.gov · 804-726-7000 · TDD 800-828-1120 Cc: Kimberly Huhn Murphy, Children's Bureau

Report to the CASA/CJA Advisory Committee

January 24, 2025, 10 a.m. – 12 p.m.

Court Appointed Special Advocate (CASA) Programs

Prepared by: Melissa O'Neill, CASA Coordinator - DCJS

I. CASA Network State Leadership Team Updates

The State Leadership Team (SLT) is focused this year on updating and implementing the goals of the strategic plan. The SLT is a partnership between the CASA Network and DCJS. DCJS participates on some but not all of the committees. DCJS facilitated two meetings of the SLT during this reporting period.

The following is a highlight of accomplishments of the SLT committees during this reporting period.

A. Training Committee

The Training Committee finished the 2024 CASA College event schedule, which featured sessions from the Advo-Chat, CASA Conversations, and Director Series. Throughout the year, a total of 10 workshops were conducted, with 673 participants in attendance. The sessions were recorded and made available on the Virginia CASA College website for those unable to attend at the time they were offered.

The Training Committee is pushing forward on completing the revisions to the Virginia Case Studies Curriculum. The final draft of the curriculum is completed and the Committee met again this reporting period to complete the steps for implementation and development of the training of facilitators curriculum.

B. Data Committee

The Data Committee did not meet during this reporting period but is scheduled to meet early in the new year. The CASA Manager User Group (CMUG) met once during the reporting period.

DCJS led the development and implementation of the CASA Program Survey to evaluate statewide program needs and gather data. Conducted every three years, this survey serves as a valuable resource for planning efforts by DCJS and the State Leadership Team.

DCJS continues to monitor technical support requests from local programs regarding CASA Manager. No consistent trends have emerged, aside from

ongoing issues with data synchronization functionality. During the most recent Developers Assistance Team (DAT) meeting, CASA Manager confirmed that addressing this issue remains a priority for future repairs.

C. Marketing Committee

The SLT continues its partnership with The Idea Center, allocating a portion of CASA Network funds to support the most effective digital marketing initiatives aimed at volunteer recruitment.

D. Diversity, Equity, Inclusion, Accessibility, and Belonging (DEIAB) Committee

The DEIAB Committee is facilitated and chaired by a local CASA program director. The committee did not meet during this reporting period.

E. Legislative Committee

The Legislative Committee is chaired by a local CASA program director and met once during the reporting period. The committee monitors state and federal legislation of impact to the CASA programs. The committee continues to work with the CASA Program network to determine the actual costs for operating a local program within state regulations and national standards.

II. Network Support Meetings

DCJS facilitated one CASA Network Support meeting and one New Director Support Calls using virtual technology during this reporting period. These meetings assist local programs with navigating program operations and management concerns.

III. CASA Regulatory Revision

The approved draft of the proposed changes to the CASA regulations remains at the approval stage by the Attorney General's office.

Report to the CASA/CJA Advisory Committee

January 24, 2025 10 a.m. – 12 p.m.

Children's Justice Act (CJA)

Prepared by: Jenna L. Foster, Children's Justice Act Coordinator - DCJS

I. Domestic and Sexual Violence (DVSV) Children's Programming Workgroup

The CJA Coordinator has identified that domestic violence / sexual violence (DVSV) child advocates throughout the Commonwealth are often overlooked as a stakeholder group working with these young secondary victims and their non-offending caregivers. To tap into this group of professionals working with child victims, DCJS convened a Workgroup of seventeen DVSV child advocates from housing and community programs across the Commonwealth, ensuring regional representation, to meet routinely to identify and address priorities. In March, the workgroup will be traveling to YWCA South Hampton Roads and learn more about their robust children's programming in-shelter and tour the Norfolk Family Justice Center.

Family Justice Centers are multi-agency, multi-disciplinary co-located service centers that provide services to victims of inter-personal violence including, intimate partner violence, sexual assault, child abuse, elder or dependent adult abuse, and human trafficking. Both public and private partner agencies assign staff on a full-time or part-time basis to provide services from one location. Centers focus on reducing the number of times victims tell their story, the number of places victims must go for help, and look to increase access to services and support for victims and their children.

II. CJA Mini-grants for Entities Working with Child Victims of Abuse or Neglect

DCJS is offering a one-time six-month grant for entities that work with child victims of abuse and neglect. Applying programs must clearly explain their purpose and need for funds as well as how the use of funds directly correlates to the CJA mandate. Their purpose of funds must also align with specific categories to support DVSV programs, equipment, support group assistance, and volunteer recruitment. The funding period is April 1-September 30, 2025.

III. Children's Telehealth Sites

In FY24, ARPA funding supported two telehealth sites: Highlands Community Services (Abingdon) and Valley Urgent Care (Harrisonburg). Funding expired on 12/31/24. With this funding opportunity, the sites were able to train a combined 14 nurses in pediatric/adolescent SANE curriculum, signed MOUs with their local CAC programs, trained local child abuse MDT and Sexual Assault Response Team (SART), and outfitted two forensic interviewing rooms. Valley Urgent Care has also created an education pathway to present to nursing students about their telehealth program and the role of the SANE nurse in their community. Both sites have built the infrastructure, collaborative

relationships with community partners, and trained staff in order to sustain their telehealth programs post-funding.

IV. Child Fatality Review

The State Child Fatality Review team concluded the review of daycare deaths cases. Recommendations are being finalized now. As a result of this team, training and policies related to daycare deaths are being added to the Child Death Investigation Protocol training for law enforcement, CPS investigators, and prosecutors.

DRAFT

Pursuant to § 2.2-3707.1 of the Code of Virginia this DRAFT of the minutes of the Court Appointed Special Advocate (CASA) and Children's Justice Act (CJA) Advisory Committee is available to the public. The public is cautioned that the information is provided in DRAFT form and is subject to change by the Advisory Committee prior to becoming final. Once the minutes have been finalized, they will be marked "FINAL" and made available to the public.

COURT APPOINTED SPECIAL ADVOCATE/CHILDREN'S JUSTICE ACT PROGRAM ADVISORY COMMITTEE MEETING MINUTES

October 25,2024

A meeting of the Advisory Committee to the Court Appointed Special Advocate and Children's Justice Act programs was held on October 25, 2024, at the Virginia Department of Social Services, 5600 Cox Road, York River Room, 111B, Glen Allen, VA 23060.

Members Present

Randy Bonds Jackie Robinson Brock (Virtual) Judge Eugene Butler Morgan Cox Katharine Hunter Jane Lissenden for Eric Reynolds Jeannine Panzera Giselle Pelaez Pat Popp, Vice-Chair Lora Smith (for Shannon Hartung) Judge Thomas Sotelo, Chair <u>Members Not Present</u> Shamika Byars Davy Fearon Sandy Karison Lana Mullins Ashley Thompson

<u>Guests</u> Rachel Miller (VDSS) Patrick Bridge (VDSS) Carley Lansden (VDSS) Jamie Andersen (Office of the Children's Ombudsman)

<u>Staff Present</u> Jenna Foster (Virtual) Laurel Marks Melissa O'Neill Terry Willie-Surratt

I. Call to Order: Judge Thomas Sotelo, Committee Chair, called the meeting to order at 10:03 AM. Members introduced themselves. Jackie Robinson Brock attended the meeting

virtually per the CASA/CJA Advisory Committee approved Policy for The Remote Participation of Members. Ms. Robinson Brock's virtual attendance was due to a personal family matter. She was in Bumpas, Virginia.

- **II. Approval of Minutes:** The committee received and reviewed the draft minutes of the July 26, 2024, meeting. Pat Popp made a motion to approve the minutes and Jeannine Panzera provided the second. The motion was approved.
- III. Presentation of the Office of the Children's Ombudsman 2024 Annual Report: Office of the Children's Ombudsman staff members, Jane Lissenden, Policy Analyst, and Jamie Anderson, Senior Investigations Analyst, provided an overview of the 2024 Annual Report. The presentation focused on the report findings, data, and trends.
- **IV. CASA Program Update:** The committee was previously provided a written update regarding the Court Appointed Special Advocate Program. The following additional updates were discussed.

CASA Expansion Legislative Study: Committee members were briefed on the CASA Expansion Legislative Study Report. The report was provided to committee members in advance of the meeting for review. Committee members discussed the report findings.

CASA Program Annual Statistics: Due to time constraints, this agenda item was not discussed and will be added to a future meeting agenda.

V. CJA Program Update: The CASA/CJA Advisory Committee was provided with a written report detailing significant activities of the CJA program this quarter. The following additional updates were provided.

The Domestic and Sexual Violence (DVSV) Children's Programming Workgroup presented a session at the recent DCJS Domestic Violence Conference. The session was related to MDTs and the importance of including DVSV Child Advocates in childfocused MDT meetings and case reviews. The session resulted in three child advocates interested in joining the DVSV workgroup.

VI. Citizen Review Panel: Committee members were provided in advance of the meeting copies of the Virginia Department of Social Services (VDSS) response to the Citizen Review Panel's 2024 Recommendations as directed by the Child Abuse and Prevention Treatment Act (CAPTA).

The committee received presentations and information on two VDSS projects in response to Citizen Review Panel recommendations.

Carley Lansden, Child Fatality Specialist, VDSS, provided a presentation on the FY23 Child Maltreatment Death Investigations.

Patrick Bridge, Director of the Division of Local Training and Development, VDSS, provided a presentation on the training system redesign for the VDSS workers. The

redesign incorporates an "academy model" training style. Plans are in place to launch the new system by FY26.

- VII. New Business: Members provided updates, information and news from their respective agencies and disciplines.
- **VIII. Adjourn:** Giselle Pelaez made a motion to adjourn the meeting and Judge Eugene Butler provided the second. The motion carried and the meeting adjourned at 12:15 PM.

Next meeting dates:

Friday January 24, 2025 – Virtual Friday April 25, 2025 Friday July 25, 2025 – Virtual